

**APPLICATION FORM: A1**  
**FOR TRAINING PARTNERS / INSTITUTES**  
**(FOR NON- NSQF ALIGNED COURSES)**

ESTABLISHMENT DETAILS					
S. No.	Particular	Details			
1.	Name of the Organization				
2.	Nature of the Organization				
3.	Address				
4.	Registration No. and Date of Registration of Applicant as a legal entity (Attach Supporting Documents)				
5.	Website (if any)				
6.	PAN Card Number (Attach Supporting Documents)				
7.	Annual Turnover (Last 03 Financial Years) (Attach Supporting Documents)	2021 – 22	2020 – 21	2019 – 20	Average Turnover
8.	GST Number (Attach Supporting Documents)				
9.	Name of the Authorized Signatory				
10.	Designation				

11.	Contact no. With Email	
12.	Name of the SPOC	
13.	Designation	
14.	Contact no. with Email	
15.	Projected Enrollment in a year	
16.	Mode of Training (E-Skilling / Offline / Hybrid)	
17.	No. Of Placement Linkages (Attach Supporting Documents)	

### 18. PAST EXPERIENCE TRAINING DETAILS

S. No.	Affiliated Organization	State	Name of the Course	Students Enrolled	Students Certified	Students Placed

### 19. TRAINING PLAN (Proposed Courses)

S. No.	Qualification (Commercial name of the course being run)	Code (if any)	Proposed no. to be trained	Hours of training		
				Theory	Practical	Apprenticeship
1.						
2.						
3.						
4.						

## 20. FACULTY DETAILS

S. No.	Name of the Faculty	Align with Course	Highest Educational Qualification	Experience related to Sector	TOT Certified (Yes / No)
1.					
2.					
3.					

## 21. PROSPECTIVE WORK SCHEDULE

Month No.	Month Name	No. of candidates for whom training will be started	No. of candidates for whom training will be completed	Cumulative OJT / Placement Target
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

## Declaration:

I \_\_\_\_\_ (Name of the authorized signatory),  
\_\_\_\_\_ (Designation) for the  
\_\_\_\_\_ (Name of the Organization)  
declare that we do not face any sanction or any pending disciplinary action from any authority, that our firm has not been blacklisted by any government or any other partner firm. In case of any further changes which affect this declaration at a later date, we would inform the Life Sciences Sector Skill Development Council (LSSSDC) accordingly. All the information stated above is true as per my knowledge and information.

(Authorized Signatory)

Signature with Seal

Name :

Designation :

FEE DETAILS
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1. Application Fee: Rs 2000/- One time fee. To be paid with application.
2. Affiliation Fee: Rs 10,000/- to be paid on approval for affiliation after due-diligence of the submitted application. Certificate of affiliation shall be issued post receipt of the Affiliation fee by LSSSDC.
3. Inspection & Due Diligence Fee included in annual fee.
4. Renewal Fee: Rs 10000/- To be paid Annually
5. Bank Details:  
Bank Name : ICICI Bank  
Beneficiary Name : Life Sciences Sector Skill Development Council  
Account No : 054801001506  
MICR Code : 110229069  
IFSC Code : ICIC0000065  
Branch : ICICI Bank, C 17, Local Shopping Complex Paschimi Marg,  
Vasant Vihar, Delhi - 110057.

**APPLICATION FEE TRANSFER DETAILS:**

Bank Name : \_\_\_\_\_

Date of Transfer : \_\_\_\_\_

UTR no. : \_\_\_\_\_

Amount Transferred: Rs. : \_\_\_\_\_

Mode of Transfer : NEFT( ) Net Banking ( ) RTGS ( ) IMPS ( ) UPI ( )